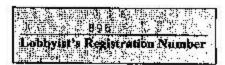
☐ co.	VERING JAN 3 AUGUST 13	AY 1 THROUGH D	GH JUNE 30		8	FC	DR OF	(latration) FICE USI Date:	ONLY
• Print in ink		Instructions	W				esmark 22	Date:	<u> </u>
 Fill in Region Complete for Baton Roup This form 	stration Number orm and return (p., LA 70808 (must be deliver	r in spaces provided, to the Board of Ethics, (225) 763-8777 or (80) red or postmarked by (225) 763-8787.	0) 842-6630.	^a Placr,	Ø		10	0 40 C2	0
1. Name	Rivero	Hec	etor		L.	1			•
i. Name	Lost	— Fir	ret		Ň	ri .		5.0	2015
2. Business	Address	1122 Colorad Street and No.	lo St., Ste	. 230	1 Av	stin	TX State	78701 780	_1,0 'U
Mailing Address		SAME	<u> 10002/2</u>	51 101		<u></u>		::	- 100 - 100
3. Business	s Phone	512-473-2157 Area Code and T	7 Telephenie Number	-				\$ 12	1945. 1459 1459
4. Total of	all expenditu	ires made January Schedules A and B)	1 through June	30:	\$	40.15			
5. Total of (When	all expendita Applicable)	ores made July 1 th (Include expenditures f	rrough Decemb	oor 31: dB)	s	536.94			
		ures made during o should equal Line 6)	alendar year:	50	\$	577.09			D)
7. Did you	make an exp	penditure exceedin	g \$50 on one o	ocasion	for any	one legis	lator:		
		ough June 30? A December 31?	Yes Yes	X	No No		NA		
If the an		r question in Num	ber 7 above is '	YES, plo	asc co	mplete Sci	hedulo	A and atta	ch.

LOBBYING EXPENDITURE REPORT



			50 for any	NAME OF THE OWNERS OF THE OWNER, OWNER,			
	From January 1 through June 30? From July 1 through December 31?	Yes Yes	X	No No		NA	
	If the answer to either question in Nu	mber 8 above is	s YES, ple	ase con	nplete S	chedule A and attach.	
9.	Did you expend funds for a reception, social gathering, or other function to which the entire legislature, either house, any standing committee, select committee, statutory committee, committee created by resolution of either house, subcommittee of any committee, recognized caucus, or any delegation thereof were invited during the reporting period?						
	☐ Yes		K	No			
	CER	THICATION O	OF ACCL	<u>IRACY</u>			
	CER I hereby certify that the information					e best of my knowledge,	
		contained herei	n is true a	nd corre	ect to the		
	I hereby certify that the information	contained herei portable expen	n is true a ditures ba	nd corre	ect to the	led herein; and that no	

Form 502, Pley, 10/02